



Management's Discussion and Analysis and  
Financial Statements

September 30, 2022 and 2021

Wagoner Hospital Authority, an  
Oklahoma Trust, d/b/a Wagoner  
Community Hospital

Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
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September 30, 2022 and 2021

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## Independent Auditor's Report

Board of Trustees  
Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Wagoner, Oklahoma

### Report on the Audit of the Financial Statements

#### ***Opinion***

We have audited the financial statements of Wagoner Hospital Authority d/b/a Wagoner Community Hospital (Authority), which comprise the statements of net position as of September 30, 2022 and 2021, and the related statements of revenues, expenses and changes in net position, and cash flows for the years then ended, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the respective financial position of the Authority, as of September 30, 2022 and 2021, and the respective changes in financial position and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

#### ***Basis for Opinion***

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Authority and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### ***Adoption of New Accounting Standard***

As discussed in Note 12 to the financial statements, the Authority has adopted the provisions of Government Accounting Standards Board (GASB) Statement No. 87, *Leases*, for the year ended September 30, 2021. Accordingly, a restatement has been made to the Authority's capital assets, long term liabilities and net position as of October 1, 2020. Our opinion is not modified with respect to this matter.

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### ***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America; and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

### ***Auditor's Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

## **Other Matters**

### **Required Supplementary Information**

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis on pages 4 through 8 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

### **Other Reporting Required by *Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated April 24, 2023 on our consideration of the Authority's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Authority's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Authority's internal control over financial reporting and compliance.

A handwritten signature in cursive script that reads "Eide Bailly LLP".

Oklahoma City, Oklahoma  
April 24, 2023

This discussion and analysis of the financial performance of Wagoner Hospital Authority d/b/a Wagoner Community Hospital (Authority) provides an overview of the Authority's financial activities and balances for the years ended September 30, 2022, 2021, and 2020. The intent of this discussion and analysis is to provide further information on the Authority's performance as a whole; readers should also review the basic financial statements and the notes thereto to enhance their understanding of the Authority's financial status.

### **Financial Highlights**

- The Authority's total assets decreased by \$3,150,182 or 23% in 2022 compared with a decrease during 2021 of \$2,852,220 or 17% and an increase during 2020 of \$6,878,082 or 76%.
- The Authority's total liabilities decreased by \$886,163 or 9% in 2022 compared with a decrease during 2021 of \$4,970,482 or 34% and an increase during 2020 of \$6,936,643 or 101% in 2020.
- The Authority reported an operating loss of \$4,091,849, \$1,151,815, and \$2,089,809 in 2022, 2021 and 2020. The operating loss increased \$2,941,656 or 256% from 2021 to 2022. The operating loss decreased \$939,616 or 45% from 2020 to 2021. The operating loss increased \$4,029,974 or 208% from 2019 to 2020.

### **Using This Annual Report**

The Authority's financial statements consist of three statements – statements of net position; statements of revenues, expenses and changes in net position; and statements of cash flows. These financial statements and related notes provide information about activities of the Authority, including resources held by the Authority but restricted for specific purposes by contributors, grantors, or enabling legislation. The Authority is accounted for as a business-type activity and presents its financial statements using the economic resources measurement focus and the accrual basis of accounting.

### **The Statement of Net Position and Statement of Revenues, Expenses and Changes in Net Position**

One of the most important questions asked about the Authority's finances is, "Is the Authority, as a whole, better or worse off as a result of the year's activities?" The statements of net position and the statements of revenues, expenses and changes in net position report information about the Authority's resources and its activities in a way that helps answer this question. These statements include assets and liabilities using the accrual basis of accounting. All of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

These two aforementioned statements report the Authority's net position and changes in them. You can think of the Authority's net position - the difference between assets and liabilities - as one way to measure the Authority's financial health, or financial position. Over time, increases or decreases in the Authority's net position are one indicator of whether its financial health is improving or deteriorating. You will need to consider other nonfinancial factors, however, such as changes in the Authority's patient base and measures of the quality of service it provides to the community, as well as local economic factors to assess the overall health of the Authority.

## The Statement of Cash Flows

The final required statement is the statement of cash flows. This statement reports cash receipts, cash payments, and net changes in cash resulting from operating, investing, and financing activities. It provides answers to such questions as where did cash come from, what was cash used for, and what was the change in the cash balance during the reporting period.

## The Authority's Net Position

The Authority's net position is the difference between its assets and liabilities reported in the Statements of Net Position and are reflected in Table 1. The Authority's net position decreased by \$2,223,664 or 52% in 2022 and increased by \$2,118,262 or 100% in 2021.

Table 1: Statements of Net Position

	2022	2021 Restated	2020 Restated
<b>Assets</b>			
Current assets	\$ 4,086,076	\$ 7,521,273	\$11,367,769
Capital assets, net	6,370,523	6,070,383	5,370,294
Noncurrent assets	279,062	294,187	-
<b>Total assets</b>	<b>\$ 10,735,661</b>	<b>\$ 13,885,843</b>	<b>\$ 16,738,063</b>
<b>Liabilities</b>			
Current liabilities	\$ 5,613,866	\$ 5,529,779	\$6,646,211
Noncurrent liabilities	3,141,333	4,111,583	7,965,633
<b>Total liabilities</b>	<b>8,755,199</b>	<b>9,641,362</b>	<b>14,611,844</b>
<b>Net Position</b>			
Net investment in capital assets	2,876,428	2,003,032	1,289,494
Unrestricted	(895,966)	2,241,449	836,725
<b>Total net position</b>	<b>1,980,462</b>	<b>4,244,481</b>	<b>2,126,219</b>
<b>Total liabilities and net position</b>	<b>\$ 10,735,661</b>	<b>\$ 13,885,843</b>	<b>\$ 16,738,063</b>

A significant component of the change in the Authority's assets and liabilities is the change in its patient receivables, accrued expenses, accounts payable, estimated third-party payor settlements, and current liabilities.

- Patient receivables decreased \$740,437 or 19% in 2022 and increased \$740,894 or 24% in 2021. The 2022 decrease is due to clean up of accounts receivable. The 2021 increase is due to an increase in services provided.
- Accrued expenses decreased \$138,131 or 25% in 2022 and decreased \$293,695 or 34% in 2021.
- Accounts payable increased \$963,043 or 103% in 2022 as a result of cash management and decreased \$27,101 or 3% in 2021.

Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Management's Discussion and Analysis

- Estimated third-party payor settlements increased \$338,695 or 92% in 2022 and decreased \$285,426 or 44% in 2021.
- Current liabilities increased \$84,087 or 2% in 2022 due to the decrease in CMS Advance Payments compared to a decreased of \$1,116,432 or 17% in 2021, due to the decrease in refundable advance-Provider Relief Funds and PPP loan forgiveness of \$1,810,000.

Table 2: Statements of Revenues, Expenses, and Changes in Net Position

	2022	2021	2020
Operating Revenues		Restated	Restated
Net patient service revenue	\$ 23,314,063	\$ 24,253,207	\$21,378,389
Other operating revenue	173,529	179,026	197,883
Total operating revenues	<u>23,487,592</u>	<u>24,432,233</u>	<u>21,576,272</u>
Operating Expenses			
Salaries and wages	12,075,894	10,783,219	9,723,465
Employee benefits	2,223,270	2,054,582	1,798,238
Purchased services and professional fees	5,810,944	5,462,500	5,734,987
Supplies	2,681,372	3,057,168	2,280,383
Depreciation and amortization	1,128,997	1,065,074	981,002
Other expenses	<u>3,608,964</u>	<u>3,159,883</u>	<u>3,148,006</u>
Total operating expenses	<u>27,529,441</u>	<u>25,582,426</u>	<u>23,666,081</u>
Operating loss	<u>(4,041,849)</u>	<u>(1,150,193)</u>	<u>(2,089,809)</u>
Nonoperating Revenues (Expenses)			
Investment income	16,635	5,923	679
Interest expense	(193,038)	(259,053)	(285,708)
Noncapital contributions	187,053	96,076	18,537
Contribution	-	(72,000)	(40,000)
Loss on sale of assets	(137,814)	(34,878)	(89,464)
Provider relief funds	1,904,994	1,722,387	2,427,204
PPP forgiveness	<u>-</u>	<u>1,810,000</u>	<u>-</u>
Total nonoperating revenues (expenses)	<u>1,777,830</u>	<u>3,268,455</u>	<u>2,031,248</u>
Change in Net Position	(2,264,019)	2,118,262	(58,561)
Net Position, Beginning of Year	<u>4,244,481</u>	<u>2,126,219</u>	<u>2,184,780</u>
Net Position, End of Year	<u>\$ 1,980,462</u>	<u>\$ 4,244,481</u>	<u>\$ 2,126,219</u>



## Operating Loss

The first component of the overall change in the Authority's net position is its operating income (loss) - generally, the difference between net patient service revenues and the expenses incurred to perform those services.

The operating loss for 2022 increased by \$2,891,656 or 256% as compared to 2021 and the operating loss decreased in 2021 by \$939,616 or 45% compared to 2020. The primary components of the decreased operating income are:

- A decrease in net patient service revenue of \$939,144 or 4% as compared to an increase in 2021 of \$2,874,818 or 13%. The decrease in 2022 is attributed to a decrease in services provided. The increase 2021 is attributed to an increase in admissions and service days at the Authority.
- An increase in salaries and wages expenses of \$1,292,675 or 12% as compared to an increase in 2021 of \$1,059,754 or 11%. The increases are due to salary adjustments and new physicians joining the Authority.
- A decrease in supplies expenses of \$375,796 or 12% as compared to an increase in 2021 of \$776,785 or 34%. The decrease in 2022 is due to a decrease in admissions and service days. The increases in 2021 is due to an increase in admissions and service days.
- An increase in purchased services of \$348,444 or 6% as compared to a decrease in 2021 of \$272,487 or 5%. The increase in 2022 was attributable to additional service contracts. The decrease in 2021 is due to the decrease in contract labor expense.

## Nonoperating Revenues and Expenses

Nonoperating revenues and expenses consist primarily of interest expense, provider relief funds and Payroll Protection Program (PPP) forgiveness. Interest expense decreased \$66,015 or 25% from 2021 to 2022 and decreased \$26,655 or 9% from 2020 to 2021. As a result of the COVID-19 pandemic, the Authority recognized Provider Relief Funds \$1,904,994 and \$1,722,387 in 2022 and 2021. The Authority recognized debt forgiveness for the PPP loan of \$1,810,000 in 2021.

## The Authority's Cash Flows

Changes in the Authority's cash flows are consistent with changes in operating income and nonoperating revenues and expenses, discussed earlier. The principal changes in the Authority's cash flows were as follows:

- Net cash used for operating activities decreased in 2022 by \$678,157 and increased by \$864,950 in 2021.
- Net cash from noncapital financing activities increased in 2022 by \$1,135,304 and decreased by \$10,346,914 in 2021. This was due to amounts received under the CARES Act in 2021.
- Net cash used for capital and capital related financing activities increased in 2022 by \$282,360 and increased by \$20,256 in 2021.

### **Capital Assets**

In 2022, the Authority purchased \$1,567,597 of capital assets and had \$6,460,878 invested in capital assets, net of accumulated depreciation, at the end of 2022 as detailed in Note 5, to the financial statements. In 2021, the Authority purchased \$1,608,178 of capital assets and had \$6,070,383 invested in capital assets, net of accumulated depreciation, at the end of 2021 as detailed in Note 5 to the financial statements.

### **Lease Obligations**

The Authority had \$956,540 and \$1,389,508 in lease obligations at September 30, 2022 and 2021 as detailed in Note 6 to the financial statements. The Authority incurred new debt totaling \$4,520 relating to right to use assets for the year ending September 30, 2022. The Authority incurred new debt totaling \$493,529 relating to right to use assets for the year ending September 30, 2021.

### **Long term Debt**

The Authority had \$2,823,023 and \$3,011,196 in long-term debt at September 30, 2022 and 2021 as detailed in Note 7 to the financial statements. The Authority incurred no new debt during 2022 and 2021.

### **Contacting the Authority's Financial Management**

This financial report is designed to provide our patients, suppliers and creditors with a general overview of the Authority's finances and to show the Authority's accountability for the money it receives. Questions about this report and requests for additional financial information should be directed to the Authority's administration by calling 918-485-1200.

Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Statements of Net Position  
September 30, 2022 and 2021

	<u>2022</u>	<u>2021</u> Restated
Assets		
Current Assets		
Cash and cash equivalents	\$ 209,790	\$ 2,969,478
Receivables		
Patient, net of allowance for doubtful accounts of \$1,132,000 in 2022 and \$1,261,000 in 2021	3,056,692	3,797,129
Other	1,220	-
Current maturities of note receivable	16,350	14,353
Security deposits	11,290	11,290
Supplies	703,742	553,736
Prepaid expenses	<u>86,992</u>	<u>175,287</u>
Total current assets	<u>4,086,076</u>	<u>7,521,273</u>
Capital Assets		
Capital assets not being depreciated	206,325	384,392
Capital assets being depreciated, net of accumulated depreciation	5,218,381	4,395,917
Right of use assets, net of accumulated amortization	<u>945,817</u>	<u>1,290,074</u>
Total capital assets, net	6,370,523	6,070,383
Note Receivable, Less Current Maturities	<u>279,062</u>	<u>294,187</u>
Total assets	<u><u>\$ 10,735,661</u></u>	<u><u>\$ 13,885,843</u></u>

Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Statements of Net Position  
September 30, 2022 and 2021

	<u>2022</u>	<u>2021</u> Restated
Liabilities and Net Position		
Current Liabilities		
Current maturities of long-term debt	\$ 198,667	\$ 179,387
Current maturities of lease liabilities	439,563	109,734
Current maturities of extended repayment schedule	-	139,078
Current maturities of CMS advance payment	1,677,173	3,242,986
Accounts payable		
Trade	1,894,242	931,199
Estimated third-party payor settlements	705,690	366,995
Accrued expenses	698,531	560,400
Total current liabilities	<u>5,613,866</u>	<u>5,529,779</u>
Noncurrent Liabilities		
Long-term debt, less current maturities	2,624,356	2,831,809
Lease liabilities, less current maturities	516,977	1,279,774
Total noncurrent liabilities	<u>3,141,333</u>	<u>4,111,583</u>
Total liabilities	<u>8,755,199</u>	<u>9,641,362</u>
Net Position		
Net investment in capital assets	2,876,428	2,003,032
Unrestricted	(895,966)	2,241,449
Total net position	<u>1,980,462</u>	<u>4,244,481</u>
Total liabilities and net position	<u>\$ 10,735,661</u>	<u>\$ 13,885,843</u>

Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Statements of Revenues, Expenses and Changes in Net Position  
Years Ended September 30, 2022 and 2021

	<u>2022</u>	<u>2021</u> Restated
Operating Revenues		
Net patient service revenue, net of provision for bad debts of \$2,164,373 in 2022 and \$2,657,984 in 2021	\$ 23,314,063	\$ 24,253,207
Other revenue	<u>173,529</u>	<u>179,026</u>
Total operating revenues	<u>23,487,592</u>	<u>24,432,233</u>
Operating Expenses		
Salaries and wages	12,075,894	10,783,219
Employee benefits	2,223,270	2,054,582
Purchased services and professional fees	5,810,944	5,462,500
Supplies	2,681,372	3,057,168
Depreciation and amortization	1,128,997	1,065,074
Other expenses	<u>3,608,964</u>	<u>3,159,883</u>
Total operating expenses	<u>27,529,441</u>	<u>25,582,426</u>
Operating Loss	<u>(4,041,849)</u>	<u>(1,150,193)</u>
Nonoperating Revenues (Expenses)		
Investment income	16,635	5,923
Interest expense	(193,038)	(259,053)
Noncapital contributions	187,053	96,076
Contribution	-	(72,000)
Loss on disposal of capital assets	(137,814)	(34,878)
Provider relief funds	1,904,994	1,722,387
Forgiveness of Paycheck Protection Program loan	<u>-</u>	<u>1,810,000</u>
Net nonoperating revenues (expenses)	<u>1,777,830</u>	<u>3,268,455</u>
Change in Net Position	(2,264,019)	2,118,262
Net Position, Beginning of Year	<u>4,244,481</u>	<u>2,126,219</u>
Net Position, End of Year	<u><u>\$ 1,980,462</u></u>	<u><u>\$ 4,244,481</u></u>

Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Statements of Cash Flows  
Years Ended September 30, 2022 and 2021

	2022	2021 Restated
Operating Activities		
Receipts from and on behalf of patients	\$ 24,254,117	\$ 23,018,266
Payments to suppliers and contractors	(11,199,948)	(11,750,589)
Payments to and on behalf of employees	(14,162,253)	(13,059,415)
Other receipts	173,529	179,026
Net Cash used for Operating Activities	(934,555)	(1,612,712)
Noncapital Financing Activities		
Principal payments on notes payable	(47,885)	(44,140)
Interest paid on note payable and extended repayment schedule	(19,843)	(55,133)
Contributions to City of Wagoner	-	(72,000)
Noncapital contributions	187,053	96,076
Proceeds from refundable advance - Provider Relief Funds	1,904,994	-
Recoupments of CMS advance payments	(1,565,813)	(601,601)
Net Cash from (used for) Noncapital Related Financing Activities	458,506	(676,798)
Capital and Capital Related Financing Activities		
Principal payments on long-term debt	(140,288)	(111,302)
Interest payments on long-term debt	(119,125)	(135,342)
Principal payments on lease liabilities	(437,488)	(401,388)
Interest payments on lease liabilities	(54,070)	(79,508)
Change in deposit on equipment	-	3,010
Purchase of capital assets	(1,562,431)	(1,306,512)
Net Cash used for Capital and Capital Related Financing Activities	(2,313,402)	(2,031,042)
Investing Activities		
Investment income	16,635	5,923
Proceeds from note receivable	13,128	4,619
Net Cash from Investing Activities	29,763	10,542
Net Change in Cash and Cash Equivalents	(2,759,688)	(4,310,010)
Cash and Cash Equivalents, Beginning of Year	2,969,478	7,279,488
Cash and Cash Equivalents, End of Year	\$ 209,790	\$ 2,969,478

Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Statements of Cash Flows  
Years Ended September 30, 2022 and 2021

	<u>2022</u>	<u>2021</u>
Reconciliation of Operating Loss to Net Cash used for Operating Activities		
Operating Loss	\$ (4,041,849)	\$ (1,150,193)
Adjustments to reconcile operating loss to net cash used for operating activities		
Depreciation and amortization	1,128,997	1,065,074
Provision for bad debts	2,164,373	2,657,984
Changes in assets and liabilities		
Patient receivables	(1,423,936)	(3,398,878)
Other receivables	(1,220)	72,081
Supplies	(150,006)	(51,826)
Prepaid expenses	88,295	(44,691)
Accounts payable	963,043	27,101
Accrued expenses	138,131	(295,317)
Extended repayment schedule	(139,078)	(208,621)
Estimated third-party payor settlements	<u>338,695</u>	<u>(285,426)</u>
Net Cash used for Operating Activities	<u>\$ (934,555)</u>	<u>\$ (1,612,712)</u>
Supplemental Disclosure of Noncash Noncapital Financing Activities		
Forgiveness of Paycheck Protection Program loan	<u>\$ -</u>	<u>\$ 1,810,000</u>
Supplemental Disclosure of Noncash Capital Related Financing Activities		
Equipment financed through capital lease arrangement	<u>\$ 4,520</u>	<u>\$ 493,529</u>
Supplemental Disclosure of Investment Activities		
Physician guarantee converted to note receivable	<u>\$ -</u>	<u>\$ 313,159</u>

## **Note 1 - Organization and Significant Accounting Policies**

The financial statements of the Wagoner Hospital Authority d/b/a Wagoner Community Hospital (the Authority) have been prepared in accordance with generally accepted accounting principles in the United States of America. The Governmental Accounting Standards Board (GASB) is the accepted standard-setting body for establishing governmental accounting and financial reporting principles. The significant accounting and reporting policies and practices used by the Authority are described below.

### **Reporting Entity**

The Authority is a 100-bed acute care hospital located in Wagoner, Oklahoma. The Authority is a public trust created under the laws of the State of Oklahoma, for the hospital facilities and equipment located in the City of Wagoner, Oklahoma. The trust indenture provides for a Board of Trustees to conduct the business of the Authority and to provide short-term acute care services for the City of Wagoner, Oklahoma, the beneficiary of the Trust. The Authority is governed by the Board of Trustees, who are appointed by the remaining Trustee or Trustees.

For financial reporting purposes, the Authority has included all funds, organizations, agencies, boards, commissions, and authorities. The Authority has also considered all potential component units for which it is financially accountable and other organizations for which the nature and significance of their relationship with the Authority are such that the exclusion would cause the Authority's financial situation to be misleading or incomplete. The GASB has set forth criteria to be considered in determining financial accountability. These criteria include appointing a voting majority of the organization's governing body and (1) the ability of the Authority impose its will on that organization or (2) the potential for the organization to provide specific benefits to or impose specific financial burdens on the Authority. The Authority does not have a component unit which meets the GASB criteria.

### **Measurement Focus and Basis of Accounting**

Basis of accounting refers to when revenues and expenses are recognized in the accounts and reported in the financial statements. Basis of accounting relates to the timing of the measurements made, regardless of the measurement focus applied.

The accompanying financial statements have been prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America. Revenues are recognized when earned, and expenses are recorded when the liability is incurred.



### **Basis of Presentation**

The statement of net position displays the Authority's assets and liabilities with the difference reported as net position. Net position is reported in the following components:

*Net investment in capital assets* consists of net capital assets reduced by the outstanding balances of any related debt obligations attributable to the acquisition, construction or improvement of those assets.

Restricted net position:

*Restricted, expendable for capital acquisition* consists of assets whose use is restricted for a specific purpose. The Authority does not have restricted net position as of September 30, 2022 and 2021.

*Restricted, nonexpendable* is subject to externally imposed stipulations which require them to be maintained permanently by the Authority. The Authority does not have restricted net position as of September 30, 2022 and 2021.

*Unrestricted net position* consists of net position not meeting the definition of the preceding categories. Unrestricted net position often has constraints on resources imposed by management which can be removed or modified.

When an expense is incurred that can be paid using either restricted or unrestricted resources (net position), the Authority's policy is to first apply the expense toward the most restrictive resources and then toward unrestricted resources.

### **Use of Estimates**

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the period. Actual results could differ from those estimates.

### **Cash and Cash Equivalents**

Cash and cash equivalents include highly liquid investments with an original maturity of three months or less.

### **Patient Receivables**

Patient receivables are uncollateralized customer and third-party payor obligations. Patient receivables, excluding amounts due from third-party payors, are turned over to a collection agency if the receivables remain unpaid after the Authority's collections procedures. The Authority does not charge interest on the unpaid patient receivables. Payments of patient receivables are allocated to the specific claims identified on the remittance advice or, if unspecified, are applied to the earliest unpaid claim.

The carrying amount of patient receivables is reduced by a valuation allowance that reflects management's estimate of amounts that will not be collected from patients and third-party payors. Management reviews patient receivables by payor class and applies percentages to determine estimated amounts that will not be collected from third parties under contractual agreements and amounts that will not be collected from patients due to bad debts. Management considers historical write off and recovery information in determining the estimated bad debt provision.

The net patient service revenue for the years ended September 30, 2022 and 2021 decreased approximately \$815,000 and \$261,000 for changes in estimates related to allowances of collectability on patient receivables due to actual collections activity different than previous estimates and impacts from a system conversion.

### **Supplies**

Supplies are valued at the lower of cost (first-in, first-out method) or market and are expensed when used.

### **Capital Assets**

Property and equipment acquisitions in excess of \$5,000 are capitalized and recorded at cost. Depreciation is provided over the estimated useful life of each depreciable asset and is computed using the straight-line method.

Right of use assets are recognized at the lease commencement date and represent the Authority's right to use an underlying asset for the lease term. Right of use assets are measured at the initial value of the lease liability plus payments made to the lessor before commencement of the lease term, less any lease incentives received from the lessor at or before the commencement of the lease term, plus any direct cost necessary to place the leased asset into service.

The estimated useful lives of property and equipment are as follows:

Land improvements	10 years
Buildings and improvements	10 - 40 years
Major moveable equipment	3 - 15 years

Right of use assets are amortized over the shorter of the lease term or useful life of the underlying asset using the straight-line method. The amortization period varies from 2 to 8 years.

Gifts of long-lived assets such as land, buildings, or equipment are reported as additions to unrestricted net position and are excluded from operating and nonoperating activities. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted net position.

### Note Receivable

The Authority issues physician guarantees as part of its recruitment process. During 2021, the Authority converted a physician guarantee to a note receivable. The note receivable is for a period of fifteen-years and issued at current interest rate of 5.25%. At September 30, 2022 and 2021, note receivable totaled approximately \$295,000 and \$309,000 and are included in note receivable on the statements of net position.

Schedule of anticipated amounts to be received is as follows:

#### Years Ending September 30,

2023	\$ 16,350
2024	15,938
2025	16,795
2026	17,699
2027	18,651
2028-2032	109,421
2033-2036	100,558
	<hr/>
Total	<u>\$ 295,412</u>

### Compensated Absences

The Authority's employees earn vacation days at varying rates depending on years of service. Employees may accumulate vacation days up to a specified maximum. Compensated absence liabilities are computed using the regular pay in effect at the statement of net position date plus an additional amount for compensation - related payments such as social security and Medicare taxes computed using rates in effect at that date.

### Operating Revenues and Expenses

The Authority's statement of revenues, expenses, and changes in net position distinguishes between operating and nonoperating revenues and expenses. Operating revenues and expenses of the Authority result from exchange transactions associated with providing health care services - the Authority's principal activity, and the costs of providing those services, including depreciation and excluding interest cost. All other revenues and expenses are reported as nonoperating.

### Net Patient Service Revenue

The Authority has agreements with third-party payors that provide for payments to the Authority at amounts different from its established rates. Payment arrangements include prospectively determined rates, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

### **Charity Care**

The Authority provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than established rates. Since the Authority does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. The amount of charges foregone for services provided under the Authority's charity care policy were approximately \$41,000 and \$668,000 for the years ended September 30, 2022 and 2021. Total direct and indirect costs related to these foregone charges were approximately \$19,000 and \$305,000 at September 30, 2022 and 2021, based on an average ratio of cost to gross charges.

### **Grants and Contributions**

The Authority may receive grants as well as contributions from individuals and private organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements, including time requirements are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as non-operating revenues. Amounts restricted to capital acquisitions are reported after non-operating income.

### **Implementation of GASB Statement No. 87**

As of October 1, 2020, the Authority adopted GASB Statement No. 87, *Leases*. The implementation of this standard establishes a single model for lease accounting based on the foundational principle that leases are financings of the right to use an underlying asset. The standard requires recognition of certain lease assets and liabilities for leases that previously were classified as operating leases and recognized as inflows of resources or outflows of resources based on the payment provisions of the contract. The effect of the implementation of this standard on beginning net position is disclosed in Note 12 and the additional disclosures required by this standard is included in Note 6.

### **Note 2 - Net Patient Service Revenue**

The Authority has agreements with third-party payors that provide for payments to the Authority at amounts different from its established rates. A summary of the payment arrangements with major third-party payors follows:

Medicare: Inpatient acute care and outpatient services rendered to Medicare program beneficiaries are paid at prospectively determined rates per visit. These rates vary according to a patient classification system based on clinical, diagnostic, and other factors. Outpatient services are paid based on a prospectively determined amount per procedure. The Authority is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the Authority and audits thereof by the Medicare Administrative Contractor (MAC). The Authority's Medicare cost reports have been audited by the MAC through September 30, 2017. The Authority's Medicare cost reports have been reopened for the years ending September 30, 2012 and 2011.

Medicaid: The Authority is reimbursed for services rendered to patients covered by the State Medicaid Program on a prospective basis at predetermined rates with no retroactive adjustment.

Blue Cross: Inpatient services rendered to Blue Cross subscribers are paid at prospectively determined rates per discharge. Outpatient services are reimbursed at outpatient payment fee screens or at charges less a prospectively determined discount. The prospectively determined discount is not subject to retroactive adjustment.

The Authority has also entered into payment agreements with certain commercial insurance carriers and other organizations. The basis for payment to the Authority under these agreements includes prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates.

Concentration of gross revenues by major payor accounted for the following percentages of the Authority's patient service revenues for the years ended September 30, 2022 and 2021:

	2022	2021
Medicare	19%	25%
Medicaid	38%	28%
Blue Cross	10%	11%
Other commercial payors	31%	31%
Self pay and other	2%	5%
	100%	100%

Laws and regulations governing the Medicare, Medicaid, and other programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.

The Authority's for Medicare and Medicaid Services (CMS) has implemented a Recovery Audit Contractor (RAC) program under which claims are reviewed by contractors for validity, accuracy, and proper documentation. A demonstration project completed in several other states resulted in the identification of potential overpayments, some being significant. If selected for audit, the potential exists that the Authority may incur a liability for a claim's overpayment at a future date. The Authority has accrued \$23,000 and \$69,000 for RAC liability as of September 30, 2022 and 2021 included in estimated third-party payor settlements. The estimate is based on historical overpayments identified.

### **CMS Advanced Payment**

The CMS Advanced Payment balance consists of advanced payments received from the Authorities for Medicare & Medicaid Services (CMS), in order to increase cash flow for Medicare Part A providers who were impacted by the COVID-19 pandemic. The Authority received \$3,844,587 in advanced payments during April 2020, which will be recouped through the Medicare claims processed beginning 365 days after the date of issuance of each advanced payment. This recoupment process will continue until the balance of the advanced payments has been recouped or 29 months from the date each advanced payment was issued, at which point any remaining unpaid balance is due. The advanced payments balance is non-interest bearing through the 29-month repayment period. The portion expected to be recouped in the next 12 months is included in current liabilities and the portion expected to be recouped in greater than 12 months is presented in long-term liabilities in the accompanying statements of net position.

### **Extended Repayment Schedule**

The Authority was approved for an Extended Repayment Schedule (ERS) for the initial settlement of the cost report for the year ended September 30, 2011. The ERS requires the Authority to make monthly payments of \$15,638, including interest at 10.25% until April 2023. The ERS is unsecured, however CMS can withhold any future cost report settlement amounts to be applied against outstanding balances. The Authority paid the remaining outstanding balance during 2022.

### **Note 3 - Provider Relief Funds**

The Authority received \$1,904,994 of Coronavirus Aid, Relief, and Economic Security (CARES) Act Provider Relief Funds (Funds) administered by the Department of Health and Human Services (HHS) in fiscal year 2022. The Funds are subject to terms and conditions imposed by HHS. Among the terms and conditions is a provision that payments will only be used to prevent, prepare for, and respond to coronavirus and shall reimburse the recipient only for healthcare-related expenses or lost revenues that are attributable to coronavirus. Recipients may not use the payments to reimburse expenses or losses that have been reimbursed from other sources or that other sources are obligated to reimburse. HHS currently has deadlines for incurring eligible expenses and lost revenues, which vary based on the date the Hospital received the Funds. Unspent Funds will be expected to be repaid.

These Funds are considered subsidies and recorded as a liability when received and are recognized as revenues in the accompanying statements of revenues, expenses, and changes in net position as all terms and conditions are considered met. As these Funds are considered subsidies, they are considered nonoperating activities. The terms and conditions are subject to interpretation, changes and future clarification, the most recent of which have been considered through the date that the financial statements were issued. In addition, this program may be subject to oversight, monitoring and audit. Failure by a provider that received a payment from the Provider Relief Fund to comply with any term or condition can subject the provider to recoupment of some or all of the payment. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.

During the years ended September 30, 2022 and 2021, the Authority recognized \$1,904,994 and \$1,722,387 of Funds as revenue, included as nonoperating revenues on the statements of revenues, expenses, and changes in net position.

#### **Note 4 - Deposits**

Cash and cash equivalents consist of cash and deposits as of September 30, 2022 and 2021.

##### **Deposits – Custodial Credit Risk**

Custodial credit risk is the risk that in the event of a bank or investment company failure, the Authority's deposits may not be returned to it. State statute requires that any deposits in excess of federal depository or other insured amounts be collateralized by U.S. Government securities in the name of the Authority. Statutes also require that the market value of the collateral be at least 100% of the excess deposits. The Authority's deposit policy does not further restrict bank deposits or limit investment deposits.

The Authority's deposits in banks at September 30, 2022 and 2021 were entirely covered by federal depository insurance or by collateral held by the Authority's custodial bank in the Authority's name.

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**Note 5 - Capital Assets**

Capital asset additions, retirements, transfers and balances for the year ended September 30, 2022 are as follows:

	Restated Balance September 30, 2021	Additions	Retirements and Transfers	Balance September 30, 2022
Capital assets not being depreciated				
Land	\$ 135,952	\$ -	\$ -	\$ 135,952
Construction in progress	248,440	85,895	(263,962)	70,373
Total capital assets not being depreciated	384,392	85,895	(263,962)	206,325
Capital assets being depreciated				
Land improvements	105,479	-	-	105,479
Buildings and improvements	6,875,938	627,217	176,108	7,679,263
Major moveable equipment	15,660,657	849,965	(190,597)	16,320,025
Total capital assets being depreciated	22,642,074	\$ 1,477,182	\$ (14,489)	24,104,767
Less accumulated depreciation				
Land improvements	57,599	7,772	-	65,371
Buildings and improvements	5,247,342	309,132	-	5,556,474
Major moveable equipment	12,941,216	463,316	(139,991)	13,264,541
Total accumulated depreciation	18,246,157	780,220	(139,991)	18,886,386
Net capital assets being depreciated	4,395,917	696,962	125,502	5,218,381
Right to use leased assets being amortized				
Major moveable equipment	1,841,314	4,520	-	1,845,834
Facility	691,122	-	-	691,122
Total right to use leased assets	2,532,436	\$ 4,520	\$ -	2,536,956
Less accumulated depreciation				
Major moveable equipment	831,527	302,702	-	1,134,229
Facility	410,835	46,075	-	456,910
Total accumulated amortization	1,242,362	\$ 348,777	\$ -	1,591,139
Net right to use leased assets	1,290,074			945,817
Capital assets, net	\$ 6,070,383			\$ 6,370,523



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The majority of construction in progress at September 30, 2022, represents cost incurred for a building remodel and ER air conditioning. Total expected cost for building remodel and ER air conditioning is approximately \$120,000 and \$110,000 to complete. The projects will be financed with internal funds and external loans. The Authority has not entered into any commitments for construction. Completion of the building remodel and ER air conditioning is set for September 2023 and October 2023.

Capital asset additions, retirements, transfers and balances for the year ended September 30, 2021 are as follows:

	Restated Balance September 30, 2020	Additions	Retirements and Transfers	Restated Balance September 30, 2021
Capital assets not being depreciated				
Land	\$ 135,952	\$ -	\$ -	\$ 135,952
Construction in progress	-	248,440	-	248,440
Total capital assets not being depreciated	135,952	248,440	-	384,392
Capital assets being depreciated				
Land improvements	84,502	20,977	-	105,479
Buildings and improvements	6,532,893	343,045	-	6,875,938
Major moveable equipment	15,180,848	694,050	(214,241)	15,660,657
Total capital assets being depreciated	21,798,243	\$ 1,058,072	\$ (214,241)	22,642,074
Less accumulated depreciation				
Land improvements	51,543	6,056	-	57,599
Buildings and improvements	4,972,965	274,377	-	5,247,342
Major moveable equipment	12,752,752	367,827	(179,363)	12,941,216
Total accumulated depreciation	17,777,260	648,260	(179,363)	18,246,157
Net capital assets being depreciated	4,020,983	409,812	(34,878)	4,395,917
Right to use leased assets being amortized				
Major moveable equipment	1,347,785	493,529	-	1,841,314
Facility	691,122	-	-	691,122
Total right to use leased assets	2,038,907	\$ 493,529	\$ -	2,532,436

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	Restated Balance September 30, 2020	Additions	Retirements and Transfers	Restated Balance September 30, 2021
Less accumulated depreciation				
Major moveable equipment	460,788	370,739	-	831,527
Facility	364,760	46,075	-	410,835
Total accumulated amortization	825,548	\$ 416,814	\$ -	1,242,362
Net right to use leased assets	1,213,359			1,290,074
Capital assets, net	\$ 5,370,294			\$ 6,070,383

**Note 6 - Lease Liabilities**

The Authority has entered into lease agreements for medical equipment and facilities. The Authority is required to make principal and interest payments through October 2027. The lease liability was valued using stated and discount rates between 0.0% and 20.63% based on the Authority's incremental borrowing rate at the inception of the leases.

Lease liabilities additions, payments and balances for the year ended September 30, 2022 and 2021 are as follows:

	Restated Balance September 30, 2021	Increases	Payments	Balance September 30, 2022	Amounts Due Within One Year
Lease liabilities					
For equipment	\$ 1,098,350	\$ 4,520	\$ 394,349	\$ 708,521	\$ 392,837
For facilities	291,158	-	43,139	248,019	46,726
Total lease liabilities	\$ 1,389,508	\$ 4,520	\$ 437,488	\$ 956,540	\$ 439,563

  

	Restated Balance September 30, 2020	Additions	Payments	Restated Balance September 30, 2021	Amounts Due Within One Year
Lease liabilities					
For equipment	\$ 964,759	\$ 493,529	\$ 359,938	\$ 1,098,350	\$ 66,595
For facilities	332,608	-	41,450	291,158	43,139
Total lease liabilities	\$ 1,297,367	\$ 493,529	\$ 401,388	\$ 1,389,508	\$ 109,734

As of September 30, 2022, lease liabilities are \$956,540 and the right of use assets are \$945,817 and consisted of the following for right of use assets:

Lease liabilities for right of use equipment were of \$708,521, at September 30, 2022 and consisted of the following:

- Right of use medical equipment with a lease liability of \$56,523. The Authority is required to make monthly principal and interest payments of \$5,125 through August 2023. The lease liability was valued using the stated rate of 1.28% based on the Authority's incremental borrowing rate. The Authority is to return the equipment at the end of the agreement.
- Right of use medical equipment with a lease liability of \$102,828. The Authority is required to make monthly principal and interest payments of \$7,154 through December 2023. The lease liability was valued using a stated rate of 4.25% based on the Authority's incremental borrowing rate. Title of the equipment will transfer to the Authority at the end of the term.
- Right of use printers with a lease liability of \$58,824. The Authority is required to make monthly principal and interest payments of \$4,027 through December 2023. The lease liability was valued using a discount rate of 4.00% based on the Authority's incremental borrowing rate. The lease contains a purchase option for fair market value at the end of the term.
- Right of use printers with a lease liability of \$3,418. The Authority is required to make monthly principal and interest payments of \$237 through December 2023. The lease liability was valued using a discount rate of 4.00% based on the Authority's incremental borrowing rate. The lease contains a purchase option for fair market value at the end of the term.
- Right of use medical equipment with a lease liability of \$150,895. The Authority is required to make monthly principal and interest payments of \$7,600 through April 2025. The lease liability was valued using a discount rate of 4.00% based on the Authority's incremental borrowing rate. The Authority is to return the equipment at the end of the agreement.
- Right of use medical equipment with a lease liability of \$8,863. The Authority is required to make monthly principal and interest payments of \$235 through November 2025. The lease liability was valued using a discount rate of 0.44% based on the Authority's incremental borrowing rate. The lease contains a purchase option for \$1,000.
- Right of use medical equipment with a lease liability of \$35,882. The Authority is required to make monthly principal and interest payments of \$1,294 through November 2025. The lease liability was valued using a discount rate of 20.63% based on the Authority's incremental borrowing rate. The Authority can renew the agreement for an additional 6 months or return the equipment at the end of the term.
- Right of use medical equipment with a lease liability of \$20,599. The Authority is required to make monthly principal and interest payments of \$478 through April 2026. The lease liability was valued using a discount rate of 0.0% based on the Authority's incremental borrowing rate. The Authority is to return the equipment at the end of the agreement.
- Right of use medical equipment with a lease liability of \$2,653. The Authority is required to make monthly principal and interest payments of \$1,288 through December 2022. The lease liability was valued using the stated rate of 6.15% based on the Authority's incremental borrowing rate. The lease contains a purchase option for \$1.

- Right of use medical equipment with a lease liability of \$25,857. The Authority is required to make monthly principal and interest payments of \$1,105 through October 2024. The lease liability was valued using a discount rate of 6.19% based on the Authority's incremental borrowing rate. The lease contains a purchase option for \$1.
- Right of use medical equipment with a lease liability of \$104,795. The Authority is required to make monthly principal and interest payments of \$4,204 through November 2024. The lease liability was valued using a discount rate of 3.75% based on the Authority's incremental borrowing rate. The lease contains a purchase option for \$1.
- Right of use medical equipment with a lease liability of \$29,513. The Authority is required to make monthly principal and interest payments of \$842 through October 2025. The lease liability was valued using a discount rate of 3.47% based on the Authority's incremental borrowing rate. The lease contains a purchase option for \$1.
- Right of use medical equipment with a lease liability of \$61,553. The Authority is required to make monthly principal and interest payments of \$1,699 through December 2025. The lease liability was valued using the stated rate of 4.61% based on the Authority's incremental borrowing rate. The lease contains a purchase option for \$1.
- Right of use medical equipment with a lease liability of \$46,318. The Authority is required to make monthly principal and interest payments of \$1,278 through December 2025. The lease liability was valued using the stated rate of 4.61% based on the Authority's incremental borrowing rate. The lease contains a purchase option for \$1.

Right of use facility with a lease liability of \$248,019. The Authority is required to make monthly principal and interest payments of \$4,500 through October 2027. The lease liability was valued using a discount rate of 4.0% based on the Authority's incremental borrowing rate. The Authority has an option to renew for the agreement for a 5 year term.

Remaining principal and interest payments on leases are as follows:

<u>Year Ending September 30,</u>	<u>Principal</u>	<u>Interest</u>
2023	\$ 439,563	\$ 35,536
2024	268,710	18,280
2025	124,503	8,918
2026	66,606	3,514
2027	52,672	1,328
2028-2032	4,486	15
Total	<u>\$ 956,540</u>	<u>\$ 67,591</u>

## Note 7 - Long-Term Debt

A schedule of changes in the Authority's long-term debt for the year ended September 30, 2022 and 2021 is as follows:

	Restated Balance September 30, 2021	Increases	Payments	Balance September 30, 2022	Amounts Due Within One Year
Direct Borrowings:					
First Bank and Trust (1)	\$ 2,641,876	\$ -	\$ 116,864	\$ 2,525,012	\$ 136,012
First Bank and Trust (2)	333,353	-	47,885	285,468	50,112
Note payable (3)	35,967	-	23,424	12,543	12,543
Total direct borrowings	<u>\$ 3,011,196</u>	<u>\$ -</u>	<u>\$ 188,173</u>	<u>\$ 2,823,023</u>	<u>\$ 198,667</u>

  

	Restated Balance September 30, 2020	Additions	Payments / Forgiveness	Restated Balance September 30, 2021	Amounts Due Within One Year
Direct Borrowings:					
First Bank and Trust (1)	\$ 2,731,053	\$ -	\$ 89,177	\$ 2,641,876	\$ 109,734
First Bank and Trust (2)	377,493	-	44,140	333,353	45,880
Note payable (3)	58,092	-	22,125	35,967	23,773
Payroll protection program	1,810,000	-	1,810,000	-	-
Total direct borrowings	<u>\$ 4,976,638</u>	<u>\$ -</u>	<u>\$ 1,965,442</u>	<u>\$ 3,011,196</u>	<u>\$ 179,387</u>

The terms and due dates of the Authority's long-term debt, including capital lease obligations, as of September 30, 2022 are as follows:

1. Note payable to bank with a variable interest rate (4.00% as of September 30, 2022), due in monthly installments of \$19,553 including interest based on a 180-month amortization schedule and a maturity date of November 12, 2036, secured by assets of the Authority.
2. Note payable to bank used for operations with a variable interest rate (3.75% as of September 30, 2022), due in monthly installments of \$5,138 including interest, due December 2027, secured by assets of the Authority.
3. Note payable to vendor, 7.21% interest rate, due in monthly installments of \$2,135 including interest, due March 2023, secured by equipment.

The Authority has an available revolving line of credit of \$500,000 with a variable interest rate and collateralized by the assets of the Authority. No amounts were outstanding as of September 30, 2022. Subsequent to year end, the Authority utilized \$400,000 of the available line of credit.

Future principal and interest payments on the Authority's long-term debt are as follows:

<u>Year Ending September 30,</u>	<u>Principal</u>	<u>Interest</u>
2023	\$ 198,667	\$ 108,502
2024	193,578	100,784
2025	201,329	93,032
2026	209,392	84,969
2027	217,777	76,583
2028-2032	915,872	271,250
2033-2037	886,408	75,658
Total	<u>\$ 2,823,023</u>	<u>\$ 810,778</u>

#### **Note 8 - Concentration of Credit Risk**

The Authority grants credit without collateral to its patients, most of whom are insured under third-party payor agreements. The mix of receivables from third-party payors and patients at September 30, 2022 and 2021, was as follows:

	<u>2022</u>	<u>2021</u>
Medicare	15%	15%
Medicaid	23%	30%
Commercial insurance	45%	40%
Other and patients	17%	15%
	<u>100%</u>	<u>100%</u>

#### **Note 9 - Defined Contribution Plan**

The Authority has a 457(b) defined contribution plan under which eligible employees can participate in the plan after one year of employment with the Authority. Total plan expense for the years ended September 30, 2022, 2021, and 2020, was approximately \$84,000, \$57,000, and \$18,000.

#### **Note 10 - Supplemental Hospital Offset Payment Program Act**

The Supplemental Hospital Offset Payment Program Act (SHOPP), designated as House Bill 1381 (HB 1381), was passed during 2011 implementing a fee on hospitals to generate matching funds to the state of Oklahoma from federal sources. The program is designed to assess Oklahoma hospitals, unless exempt, a supplemental hospital offset payment program fee. The collected fees will be placed in pools and then allocated to hospitals as directed by legislation. The Oklahoma Health Care Authority (OHCA) does not guarantee that allocations will equal or exceed the amount of the supplemental hospital offset payment program fee paid by the hospital.

The Authority records payments to administrative services expense and receipts from SHOPP as a reduction in contractual adjustments. The Authority made SHOPP payments totaling \$556,756 for the year ended September 30, 2022. In return, the Authority received \$4,562,656 during 2022. The Authority made SHOPP payments totaling \$465,120 for the year ended September 30, 2021. In return, the Authority received \$3,455,392 during 2021. Future changes in law or regulation at the federal or state level can adversely affect or eliminate SHOPP.

## **Note 11 - Contingencies**

### **Risk Management**

The Authority is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters other than employee health claims. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

### **Medical Malpractice Insurance**

The Authority has malpractice insurance coverage to provide protection for professional liability losses on an occurrence-basis subject to a limit of \$1,000,000 per claim and an annual aggregate limit of \$3,000,000.

### **Litigations, Claims, and Disputes**

The Authority is subject to the usual contingencies in the normal course of operations relating to the performance of its tasks under its various programs. In the opinion of management, the ultimate settlement of any litigation, claims, and disputes in process will not be material to the financial position, operations, or cash flows of the Authority.

The health care industry is subject to numerous laws and regulations of federal, state, and local governments. Compliance with these laws and regulations, specifically those relating to the Medicare and Medicaid programs, can be subject to government review and interpretation, as well as regulatory actions unknown and unasserted at this time. Federal government activity with respect to investigations and allegations concerning possible violations by health care providers of regulations, could result in the imposition of significant fines and penalties, as well as significant repayments of previously billed and collected revenues from patient services.

### **COVID-19 Pandemic**

During 2022 and 2021, the world-wide coronavirus pandemic impacted national and global economies. The Authority is closely monitoring its operations, liquidity and capital resources and is actively working to minimize the current and future impact of this unprecedented situation. As of the date of issuance of these financial statements, the current and future full impact to the Authority is not known.

**Note 12 - Adoption of New Standard**

As of October 1, 2020, the Authority adopted GASB Statement No. 87, *Leases*. The implementation of this standard establishes a single model for lease accounting based on the foundational principle that leases are financings of the right to use an underlying asset. The Statement requires recognition of certain lease assets and liabilities for leases that previously were classified as operating leases and recognized as inflows of resources or outflows of resources based on the payment provisions of the contract. Beginning capital assets, long term liabilities and cash flows were restated to retroactively adopt the provisions of GASB Statement No. 87 as follows:

	Originally Presented September 30, 2021	Restatement	As restated September 30, 2021
<b>Statement of Net Position</b>			
<b>Assets</b>			
Capital assets being being depreciated, net	\$ 5,075,041	\$ (509,418)	\$ 4,565,623
Right to use leased assets being amortized, net	-	1,120,368	1,120,368
Total capital assets	5,459,433	610,950	6,070,383
Total assets	<u>\$ 13,274,893</u>	<u>\$ 610,950</u>	<u>\$ 13,885,843</u>
<b>Liabilities</b>			
<b>Current liabilities</b>			
Current maturities of long term debt	\$ 443,904	\$ (264,517)	\$ 179,387
Current maturities of right to lease liabilities	-	109,734	109,734
Total current liabilities	5,684,562	(154,783)	5,529,779
<b>Noncurrent liabilities</b>			
Long term liabilities	3,327,586	(495,777)	2,831,809
Right to use lease liabilities	-	1,279,774	1,279,774
Total noncurrent liabilities	3,327,586	783,997	4,111,583
Total Liabilities	<u>9,012,148</u>	<u>629,214</u>	<u>9,641,362</u>
<b>Net position</b>			
Net investment in capital assets	2,021,296	(18,264)	2,003,032
Unrestricted	2,241,449	-	2,241,449
Total net position	<u>4,262,745</u>	<u>(18,264)</u>	<u>4,244,481</u>
Total liabilities and net position	<u>\$ 13,274,893</u>	<u>\$ 610,950</u>	<u>\$ 13,885,843</u>



Wagoner Hospital Authority  
d/b/a Wagoner Community Hospital  
Notes to Financial Statements  
September 30, 2022 and 2021

	Originally Presented September 30, 2021	Restatement	As restated September 30, 2021
<b>Statement of Revenues, Expenses and Changes in Net Position</b>			
Operating Expenses			
Depreciation and amortization	\$ 906,812	\$ 158,262	\$ 1,065,074
Other expenses	3,347,430	(187,547)	3,159,883
Total operating expenses	25,611,711	(29,285)	25,582,426
Operating loss	(1,179,478)	29,285	(1,150,193)
Nonoperating Revenues (Expenses)			
Interest expense	(229,768)	(29,285)	(259,053)
Net nonoperating revenues	3,297,740	(29,285)	3,268,455
Net Position, Beginning of Year	2,144,483	(18,264)	2,126,219
Net Position, End of Year	\$ 4,262,745	\$ (18,264)	\$ 4,244,481
<b>Statement of Cash Flows</b>			
Operating activities			
Payments to suppliers and contractors	\$ (11,936,514)	\$ 185,925	\$ (11,750,589)
Net cash used for operating activities	(1,798,637)	185,925	(1,612,712)
Capital and capital related financing activities			
Principal payments on long-term debt	(366,980)	255,678	(111,302)
Principal payments on right to use lease liabilities	(174,635)	39,293	(135,342)
Payment of interest on right to use lease liabilities	-	(413,940)	(413,940)
Payment of interest on long-term debt	-	(66,956)	(66,956)
Net cash used for capital and capital related financing	(1,845,117)	(185,925)	(2,031,042)
Net change in cash and cash equivalents	\$ (4,310,010)	\$ -	\$ (4,310,010)

**Note 13 - Going Concern and Management's Plan**

The Authority's financial statements have been prepared assuming the Authority will continue as a going concern, which contemplates the realization of assets and satisfaction of liabilities in the normal course of business. The Authority has incurred substantial losses of \$2,264,019 through September 30, 2022 and has negative cash flows from operations. The Authority's ability to continue as a going concern is contingent upon its ability to reduce expenses, generate revenue and attain profitable operations. Management has implemented plans subsequent to year-end to alleviate the doubt. Management's plans include reducing salary and purchase services expenses and improve patient service revenues by renegotiating or terminating contracts. In addition, management has extended the repayment of the CMS Advanced Payment liability as noted in Note 14.

**Note 14 - Subsequent Events**

During October 2022, the Authority was approved for an ERS on the outstanding CMS Advanced Payment liability. The ERS requires the Authority to make monthly payments of \$31,361, including interest at 4.0% until September 2027. The ERS is unsecured, however CMS can withhold any future cost report settlement amounts to be applied against outstanding balances.

The Authority has evaluated subsequent events through April 24, 2023 the date which the financial statements are available to be issued.



**Independent Auditor's Report on Internal Control over Financial Reporting and  
on Compliance and Other Matters Based on an Audit of Financial Statements  
Performed in Accordance with *Government Auditing Standards***

Board of Trustees  
Wagoner Hospital Authority d/b/a Wagoner Community Hospital  
Wagoner, Oklahoma

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of Wagoner Hospital Authority d/b/a Wagoner Community Hospital (Authority) as of and for the year ended September 30, 2022, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements, and have issued our report thereon dated April 24, 2023.

**Internal Control over Financial Reporting**

In planning and performing our audit of the financial statements, we considered the Authority's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control. Accordingly, we do not express an opinion on the effectiveness of the Authority's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Authority's financial statements will not be prevented or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that have not been identified. We did identify a deficiency in internal control, described in the accompanying schedule of findings that we consider to be material weakness: 2022-001.

## **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the Authority's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

## **Authority's Response to Findings**

The Authority's response to the findings identified in our audit is described in the accompanying schedule of findings. The Authority's response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on them.

## **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Authority's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Authority's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

A handwritten signature in cursive script that reads "Eide Bailly LLP".

Oklahoma City, Oklahoma  
April 24, 2023

## Findings – Financial Statements Audit – Internal Controls over Financial Reporting

### Material Weakness

#### 2022-001      Cost Report Estimate

*Criteria:* A properly designed system of internal control over financial reporting allows entities to initiate, record, process and report financial report data reliably in accordance with generally accepted accounting principles.

*Condition:* During the audit, a material adjustment was made to the financial statements as a result of differences in the estimated third-party payor settlements.

*Cause:* A misstatement to the internal financial statements was not prevented or detected and corrected on a timely basis in the normal course of business. Therefore, there was an adjusting journal entry at year end to properly state estimated third party payor settlements.

*Effect:* Audit adjustment was made to estimated third-party payor settlements.

*Auditor's Recommendation:* We recommend the Authority regularly review the amounts used to calculate allowances against current payment trends throughout the year and at year end. In addition, we recommend that a process is put in place to ensure the estimate for the cost report settlement is being made at year end and periodically throughout the year as determined necessary by management.

*Views of Responsible Officials:* Management will work to analyze these accounts and determine the proper course of action on the accounts.